PTO/SB/01 (10-00)

8403.385

Donald E. Weder

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**DECLARATION FOR UTILITY OR** 

**Attorney Docket Number** 

DESIGN PATENT APPLICATION (37 CFR 1.63)		First Named Invento	Donald E. Weder						
		COMPLETE IF KNOWN							
		Application Number	Not Yet Assigned						
☐ Declaration	Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Filing Date							
Submitted OR		Group Art Unit							
with Initial Filing		Examiner Name							
As a below named inventor, I hereby declare that:									
My residence, mailing address, and citizenship are as stated below next to my name.									
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
METHOD FOR PROVIDING A DECORATIVE COVER FOR A FLORAL GROUPING									
(Title of the Invention)									
the specification of which  X is attached hereto									
OR as United States Application Number or PCT International									
was filed on (MM/DD/YYYY)									
Application Number Not Yet Assigned and was amended on (MM/DD/YYYY) (If applicable).									
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.									
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation- in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.									
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.									

**Prior Foreign Application** Foreign Filing Date **Priority Certified Copy Attached?** Number(s) Country (MM/DD/YYYY) **Not Claimed** YES NO Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s) Filing Date (MM/DD/YYYY) Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Petent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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## **DECLARATION** — Utility or Design Patent Application

Direct all correspondence to:	Customer Nu or Bar Code				OR 🗌	Correspondence address below		
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INVENTOR:								
Given Name (first and middle [if any]) Donald E.  Family Name or Surname Weder								
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NAME OF SECOND INVENTOR:   A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any])				Family Name or Surname				
Inventor's Signature						Date		
Residence: City State		State		Country	Citizenship			
Malling Address								
Malling Address								
City State				ZIP		Country		
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.								